Prescriber

Objective: A process to identify prescribers of concern, comprehend and review their practice and prescribing patterns, and develop bright lines of guidance to determine the most appropriate actions to take.

Description: An algorithm is utilized to analyze prescription data, through which volume share and growth are calculated and "red flag" prescribing patterns are identified. Prescribers at or above a designated percentile for volume and share with a set number of red flags are identified as prescribers of concern. Prescribers receive written notification and have the opportunity to engage in an interview about their practice before a final determination is made whether or not to suspend their dispensing privileges.

Store

Objective: To proactively identify stores with risky dispensing habits based on multiple red flags across a variety of metrics.

Decription: An algorithm is utilized to provide a holistic view to stores of concern. The store algorithm is run for four groups: oxycodone, hydrocodone, opiods and benzodiazepines. Each drug group is flagged for a given level of concern: Tier 1, Tier 2 and not flagged.

Tier 1 stores enter the Controlled Substance Monitoring Program (CSMP). This initiates a deep dive controlled substance audit by the loss prevention team. Further actions decided by the Accountability Review Board may include reinforcement of Dispensing Guidelines, education by the pharmacy supervisor, continuing education, documented counseling and personnel changes. Escalated consequences are utilized for those that do not show improvement.

Stores in Tier 2 are held and escalated into the CSMP if they have an additional identified issue through the distribution center or outside vendor inventory monitoring program (SOM).

Dispensing Guidelines

Objective: The Dispensing Guidelines reinforce that CVS Caremark expects and supports decisions by its Pharmacists to ***not*** fill prescriptions if, in the sound exercise of their professional and clinical judgment they believe or suspect that the prescription was not issued for a legitimate medical purpose by a practitioner acting in the usual course of professional practice.

Description: The policy reviews common red flag behavior that may assist the pharmacist in exercising their corresponding responsibility. It reinforces suspending the fill ***all controlled substance prescriptions*** from practitioners you believe or have reason to doubt are issuing prescriptions for legitimate medical purposes in the course of a valid doctor/patient relationship.

Maximum Allowable Quantity

Objective: The Maximum Allowable Quantity (MAQ) is a thresholding system that limits the quantity of high risk drugs a store can order via Cardinal and the central warehouse (hydrocodone only).

Description: The MAQ is calculated using a statistical outlier model based on volume and share dispensing patterns. The drugs included in the current program are: oxycodone, amphetamine, methylphenidate, morphine, methadone, lisdexamphetamine, hydromorphone, dexmethylphenidate, oxymorphone, and dextroamphetamine. CVS provides the cutoffs to Cardinal. Cardinal sends a list to CVS of stores approaching or exceeding the set threshold for a given drug in a given month. Outreach is performed to stores to identify concern. Currently, Florida and Maryland have MAQ's in place.

Suspicious Order Monitoring (SOM)

Objective: SOM is a monitoring program that is administered by a distributor to identify suspicious orders on controlled substances.

Description: Distributors are legally obligated to utilize a system to detect orders of suspicion. Identifiers may be orders or large volume, patterns of ordering, growth of orders and other tailored factors.

Cardinal sets and flags threshold buckets based on store ordering and provides CVS with daily lists of flagged stores. The Professional Practice Team performs store outreach to evaluate the store and create a demographic summary. Pharmacy Supervisors are notified via email of the interaction. Specific information about the store is sent to Cardinal.

Our Distribution centers administer their own SOM program. Orders of interest are held for review then released or cancelled. If a suspicious order is detected, the store is prohibited from further orders in that drug family until the store is cleared. A cross functional team responds to ensure stores are fully evaluated and clear to resume shipping.

PMP

Objective: Encourage use of state PDMP websites where available.

Description: PMP websites assist pharmacists in identifying and deterring drug abuse and diversion at the prescriber, pharmacy, and patient levels. Rollout of access to state PMP via RxNet is expected to be completed in Q1. Integration of PMP access into RxConnect is scheduled for Q3.

Regulatory Audit

Objective: The Regulatory Audit is designed to ensure stores are in compliance with state and federal regulations. This quarterly program, as part of the Professional Standards Review, will better prepare stores for state and federal inspections.

Description: Each quarter, the PIC completes the Regulatory Review in the on-line tool. A summary of results determines if a needs improvement or meets expectation rating for the related Stores Own Sales Professional Standards tactic will populate. The Pharmacy Supervisor's subsequent coaching visit would begin with a review of the PIC's review results, created Action Plan and improvement progress to date. Two months post, the Pharmacy Supervisor would then complete the Regulatory review independent of the PIC's ratings. Deficiencies identified by the Pharmacy Supervisor would generate the creation of Coaching Notes for those behaviors which remain as opportunities and for any new gap identified. An independent review will be conducted once yearly to assess accuracy of the specific Rx Supervisor's audit.